## 1203892017

FE6AN026

**FEC** FORM 3X

## **REPORT OF RECEIPTS** AND DISBURSEMENTS For Other Than An Authorized Committee

2012 OCT 18 PM 12: 10

1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ♥	Example: If typing, type over the lines.	12FE4M5	AIL'CENTER
IDAHO HORSE ASSOCIATION:				
<u> </u>				
ADDRESS (number and street)	1504 \$. HOUSTON	STREET		
Check if different than previously reported. (ACC)	KAUFMAN		TX   75142	· · · · · · · · · · · · · · · · · · ·
2. FEC IDENTIFICATION NU		_	STATE A	ZIP CODE ▲
C 00526947	3. 15	THIS NEW PORT (N) OF	AMENDED (A)	1
4. TYPE OF REPORT (Choose One)	Report	0 (M2) May 20 (M		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Reparts:			(=1)	Year Only)
April 15 Quarterly Report (Q1	النيا ا	0 (M4)	Oct 20 (M10) General (12G)	
July 15 Quarterly Report (Q2	PRE-Election	Convention (12C)	Special (12S)	Runoff (12R)
October 15 Quarterly Report (Q3 January 31 Year-End Report (YE	3)	<u> </u>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	in the
Year-End Report (YE  July 31 Mid-Year  Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R)	State of Special (30S)
Termination Report (TER)	Report for the:		· [ • • • • • • • • • • • • • • • • • •	in the State of
5. Covering Period 08 13 12012 through 15 12012				
I certify that I have examined this	s Report and to the best of n Julie Caramante	ny knowledge and belief it is	true, correct and comple	ete.
Type or Print Name of Treasurer	June Caramante			
Signature of Treasurer Julie Caramante Date 10 ' 15 ' 2012				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.				
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